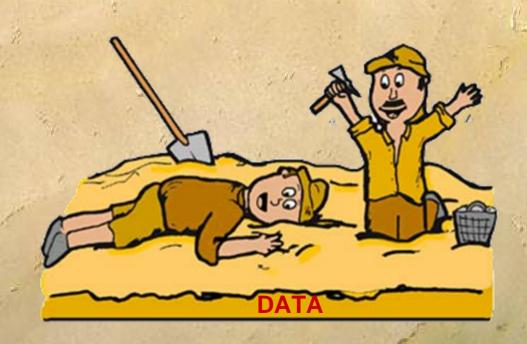
Welcome

Patient Data Section

Digging Into The Data

Lorraine Sady, Research Analyst March 2007



Agenda



PART I - ED and AS Data Findings

- Top Principal Diagnoses
- Top Principal E-Codes
- Top Principal Procedures

PARTI

ED and AS Data Findings for July 1, 2005 Thru December 31, 2005



Top Principal Diagnosis Groups July-December 2005

Diagnosis Group	No. of Records	ICD-9 Code Range	Top Diagnosis	Percent of Records
Injury and Poisonings	1,071,100	800-999	Open Wound of Finger w/o Complication (883.0)	4.6%
Symptoms	900,060	780-799	Abdominal Pain- Unspecified Site (789.00)	11%
Diseases of Respiratory System	446,200	460-519	Acute Upper Resp Infection- Unspecified (465.9)	22%

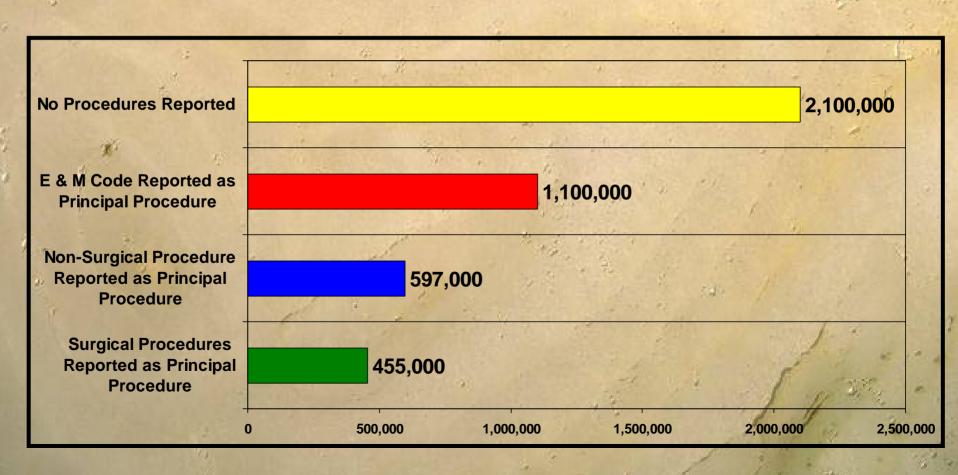
Top Principal E-Code Groups July-December 2005

E-Code Group	No. of Records	ICD-9 Code Range	Top E-Code	Percent of Records
Other Accidents	419,530	E916-E928	Overexertion & Strenuous Movements (E927)	21%
Accidental Falls	288,490	E880-E888	Fall from other Slip, Trip, or Stumble (E885.9)	31%
Motor Vehicle Traffic Accidents	126,990	E810-E819	Other Motor Vehicle Accident (E812.0)	36%

Top Principal Procedure Groups July-December 2005

Procedure Group	No. of Records	CPT Code Range	Top Procedure	Percent of Records
Surgery – Integumentary System	192,610	10040 - 19499	Simple Repair: Superficial Wounds (12001)	57%
Surgery – Musculoskeletal System	113,520	20000 - 29999	Short Arm Splint (29125)	25%
Surgery – Cardiovascular System	87,610	33010 - 37799	Venipuncture (36415)	82%

July-December 2005 Total Encounters 4,259,184



ED and AS Data OSHPD Reporting Requirement for Principal Procedure Section 97262

The patient's principal procedure is one that is surgical in nature, or carries a procedural risk, or carries an anesthetic risk. The procedure related to the principal diagnosis, as the chief reason for the encounter, shall be selected as the principal procedure. The procedure shall be coded according to the Current Procedural Terminology, fourth edition (CPT-4).



July-December 2005

- 1.1 million encounters reported with E & M code as Principal Procedure
 - ▶ 57,000 of these with surgical procedure as Other Procedure

Ambulatory Surgery

July-December 2005

Total Encounters: 1,379,570

	Hospital-Based	Freestanding
Facilities	363	461
Total Encounters	851,010	528,560
Percentage of all AS Encounters	62%	38%

Hospital-Based AS

Top Principal Diagnosis Groups July-December 2005

Diagnosis Group	No. of Records	ICD-9 Code Range	Top Diagnosis	Percent of Records
Diseases of Digestive System	147,590	520-579	Inguinal Hernia, Unilateral (550.90)	10%
Diseases of Musculoskeletal System	109,750	710-739	Degeneration Low Back Disc (722.52)	7%
Diseases of Nervous System	104,600	320-389	Unspecified Cataract (366.9)	19%

Freestanding ASC

Top Principal Diagnosis Groups July-December 2005

Diagnosis Group	No. of Records	ICD-9 Code Range	Top Diagnosis	Percent of Records
Diseases of Musculoskeletal System	122,230	710-739	Thoracic or Lumbosacral Neuritis (724.4)	13%
Diseases of Nervous System	97,740	320-389	Senile Cataract- Nuclear Sclerosis (366.16)	22%
Diseases of Digestive System	92,920	520-579	Diverticulosis of Colon (562.10)	22%

Hospital-Based AS

Top Principal E-Code Groups July-December 2005

E-Code Group	No. of Records	ICD-9 E- Code Range	Top E-Code	Percent of Records
Other Accidents	11,990	E916-E928	Unspecified Accident (E928.9)	38%
Abnormal Reactions w/o Mis- adventures	8,310	E878-E879	Other specified Surg Operations & Procedures (E878.8)	24%
Accidental Falls	7,080	E880-E888	Unspecified Fall (E888.9)	27%

Freestanding ASC

Top Principal E-Code Groups July-December 2005

E-Code Group	No. of Records	ICD-9 E- Code Range	Top E-Code	Percent of Records
Other Accidents	4,490	E916-E928	Overexertion & Strenuous Movements (E927)	49%
Late Effects of Injury	1,420	E929, E959, E969, E977, E989	Late Effects of Injury (E989)	85%
Accidental Falls	1,140	E880-E888	Fall from other Slip, Trip, or Stumble (E885.9)	31%

Hospital-Based AS

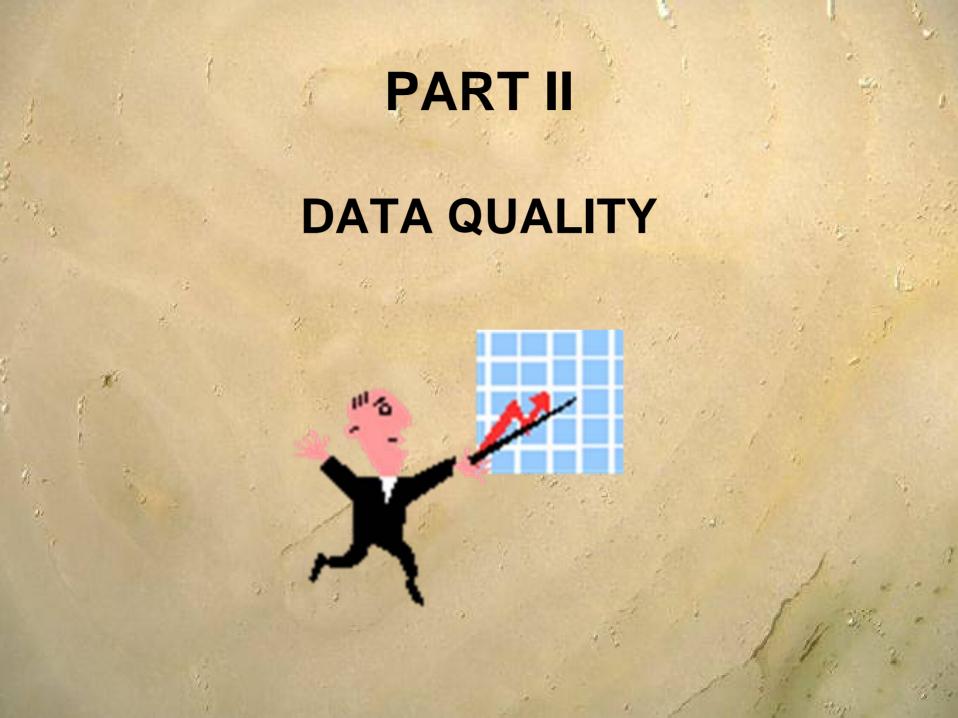
Top Principal Procedure Groups July-December 2005

	Procedure Group	No. of Records	CPT Code Range	Top Procedure	Percent of Records
	Surgery- Digestive System	269,450	40490- 49999	Colonoscopy, Flexible (45378)	22%
	Surgery – Musculoskeletal System	109,840	20000- 29999	Arthroscopic Knee Surgery (29881)	12%
10	Surgery – Eye & Ocular System	78,800	65091- 68899	Cataract Surgery (66984)	60%

Freestanding ASC

Top Principal Procedure Groups July-December 2005

Procedure Group	No. of Records	CPT Code Range	Top Procedure	Percent of Records
Surgery – Digestive System	217,690	40490- 49999	Colonoscopy, Flexible (45378)	34%
Surgery – Nervous System	82,870	61000- 64999	Spinal Anesthetic Injection (62311)	31%
Surgery – Eye & Ocular Sys	81,140	65091- 68899	Cataract Removal w/ Insertion of Lens Prosthesis (66984)	67%



PART II: Data Quality

- Common Reasons for Data Rejection
- Non-Critical Edits (Warning Flags)
- Questionable Data
- Future ED and AS Edits

- 1.9 million records submitted
- Most Common Error: Blank field
 - ► Prehospital Care and Resuscitation (DNR)
 - Principal Diagnosis
 - Condition Present at Admission for Other Diagnoses

❖ DNR: Blank

Standard edit flag: S001

Before correction: 22,912 records

After correction: 473 records

Principal Diagnosis: Blank

Standard edit flag: S001

Before correction: 16,955 records

After correction: 11 records

Cond Present at Admission Blank for Other Diagnoses:

Standard edit flag: S001

Before correction: 7,256 records

After correction: 748 records

Inpatient Coding Edit Errors – V Flags January-June 2006 Report Period

Average Percentage of Records with Errors

- ► First Submission: 0.75%
- ► After Correction: 0.33%

CONGRATULATIONS!

Invalid Procedure Codes

- HCPCS Level II G Codes
- Crosswalk G-Code to a CPT code
- Implement Crosswalk system

Invalid E-Codes

- Diagnosis Code
- Data Entry Errors
 - ►E928. ~~ E5 ~~ E99.2
 - ►EE905 ~~ E99..2

Another E-Code Error

Place of Occurrence E849 reported as Principal E-Code

Invalid ZIP Codes

- After Correction: 9,400 encounters
 - ► XXXXXX, YYYYYY, ZZZZZZ ► SWEDE
 - ▶ Foreign "ZIP Codes"
 ▶ SONOM
 - ► MEXIC ► UNK or UNKNO

Standard Edit Program Warning Flags

- Warning Flags (aka: non-critical edits)
 - Will not cause data to be rejected
 - ▶ Identified as an SW flag
- Review records with Warning Flags
 - Check your Standard Edit Summary and Detail Report
 - Request Custom Reports from your analyst

Why Warning Flags?

- Analysis tool for improvements to the MIRCal validation process.
- Promotes feedback from our facilities.
- Used as "testing ground" to introduce new edits.

Standard Edit Program Warning Flags

- SW05: HIV Test Results 795.1 or V08 reported as PRINCIPAL Diagnosis
- SW06: HIV Test Results 795.1 or V08 reported as OTHER Diagnosis
- See Quick Notes Issue #10: www.oshpd.ca.gov/MIRCal/resources

Standard Edit Program Warning Flags HIV Test Results: 795.1 or V08

	No. Records Before Correction	No. Records After Correction
Inpatient Jan-June 2006	423	209
ED July-Dec 2005	Not available	215
Hosp-Based AS July-Dec 2005	Not available	15
Freestanding ASC July-Dec 2005	Not available	4

Inpatient Standard Edit Program Warning Flags

SW12: DNR reported as "Yes" on Psychiatric, Chemical Dependency, or Physical Rehabilitation Type of Care

❖ Before Correction: 3,583

After Correction: 2,884

Inpatient Standard Edit Program Warning Flags

DELETED!

SW08 – Turned off effective with the July-December 2006 Report Period:

Medicare and Type of Coverage "2" (Other Managed Care) is an unlikely combination

Inpatient Standard Edit Program Warning Flags

REVISED!

- Effective with the January-June 2007 Report Period:
 - ➤ SW11 Revised maximum charge per day from \$40,000 to \$50,000:

Charge per Day is less than \$100 or greater than \$50,000

REMEMBER, before making a Formal Submission...



- Check your Error Summary Report
- Review records with Warning Flags on your Edit Detail Report
- Ask your analyst to run a Custom Report of any or all Warning flags



- High percentages reported in certain data element categories:
 - Patient Disposition-Other
 - Expected Source of Payment-Other
 - Sex-Unknown
- Review your Data Distribution Report

How To Access Your Data Distribution Report

- Log on to MIRCal
- Select Data Type and Report Period
- From the Main Menu, click on "Error Reports"
- Under Informational Reports, click on "VIEW" next to the Data Distribution Report

- Patient Disposition Other
 - ▶ 100% of records in Other
 - ► Questionable Percentages: 10% to 99%
- What are facilities reporting in "Other"?

- Expected Source of Payment Other
 - ▶ 100% of records in Other
 - ► Questionable Percentages: 5% to 99%
- What are facilities reporting in "Other"?

Unknown Sex

Percent of Records

Emergency Department 1% or Less

Hospital-Based AS .4% or Less

Freestanding ASC 1% to 99.8%

- Checks for questionably high percentage of records reported in one data element category
- A "C" followed by a 3-digit number will identify
 Comparative Edits
- Comparative Edit Summary Report will list the "C-flags" in your data
- ETL: Data is rejected if it fails one or more Comparative Edits

- Target Date: January 1, 2008
- Critical flag: 100% of records reported in one data element category for:
 - Sex
 - ▶ Race
 - Ethnicity
 - ► Patient Disposition [Excludes HOME]
 - Expected Source of Payment

- Target Date: To Be Determined
- Critical flag: Questionably high percentage of records reported in:
 - ▶ Race Other or Unknown
 - Ethnicity Unknown
 - Patient Disposition Other
 - Expected Source of Payment Other
 - ZIP Code Unknown

- Target Date: January 1, 2008
- Critical flag: Sex reported as Unknown on more than .1% of total records

- Target Date: January 1, 2008
- Critical flag: Principal Diagnosis reported as 799.9 on more than 2% of total records

Future ED and AS Edits Standard Edit Program

- Target Date: January 1, 2008
- Critical flag: Age Edits for ICD-9 CM Diagnosis Codes and E-Codes

EXAMPLE: Record reported with Diagnosis Spinal Stenosis and Age is less than 15 yrs

Critical flag on Diagnosis Code and Date of Birth

Future ED and AS Edits Standard Edit Program

- Target Date: January 1, 2008
- Critical flag: Sex Edits for ICD-9 CM Diagnosis Codes and E-Codes

EXAMPLE: Record reported with Diagnosis Ovarian Cyst and Sex = Male

Critical flag on Diagnosis Code and Sex

Future ED and AS Edits Standard Edit Program

- Target Date: To Be Determined
- Critical flag: E & M Code reported as Principal Procedure, with Other Procedures reported on the record

NOTE: If an E & M Code is the only procedure reported on the record, then no flag

WRAP-UP

- Part 1 Data Findings
- Part 2 Data Quality
 - Data Anomalies
 - Warning Flags
 - Data Distribution Report
 - Custom Reports
 - Future ED and AS Edits



THAT'S ALL FOLKS!



Questions
and
Answers

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